

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skidi-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							

Work Order ID 96151

January-23-13 10:52:54 AM

96151

Page 2

Item ID: D3015-3

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Locknut

Stop

NS2

Start Date: 2/01/13 **Start Qty:** 50.00

50

Cust Item ID:

Required Date: 2/01/13 **Req'd Qty:** 50.00

50

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

**Sequence ID/
Work Center ID**

**Operation
Description**

**Set Up/
Run Hours**

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

Identify as per dwg & Stock Location: O23

130

Packaging

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Quality Control

Memo

0.00

Re3/01/23 (60)

13/1/29 (8)

PL 13-0129

NCR: Yes / No

WORK ORDER NON-COMPLIANCE / UPDATE

DQA: Date:

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skic-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear			General								
Bending		Bend		Grain		Ovalized		Pressure/Forced			
Centre Not Concentric to O/S		BOM/Route		Hardware		Over/Under tolerance		Temperature/Cure			
Cracks		Broken/Damaged		Inspection Incomplete		Part Incorrect		Weld			
Crushed/Crimped.		Burrs		Instructions Incomplete/Unclear		Part Lost/Missing		Wrong Stock Pulled			
Cuffs		Contamination		Maintenance		Part Moved					
Heat Treat		Countersink		Mislabeled		Positioned Wrong					
Inspection Strip in Tube		Cut Too Short		Misread		Power Loss/Surge					
Ripples in Bend		Drill Holes		Offset							
Torque Waves in Extrusion		Drawing		Out of Calibration							
Turning Sequence		Finish		Out of Secuence							
Wave/Twist in Tube		Folio		Outside D'mensions							

Picklist Print

January-23-13 10:52:54 AM

Page 1

Work Order ID: 96151

Parent Item: D3015-3

Parent Item Name: Locknut

Start Date: 2/01/13

Required Date: 2/01/13

Start Qty: 50.00

Required Qty: 50.00

Comments: IPP: A01.06.28New IssueSM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

PFS-LNNC5/16S1 Lock Nut		Purchased	No			110	Each	0.0000	1	50			50>SP13-01-28
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DQA: _____ Date: _____

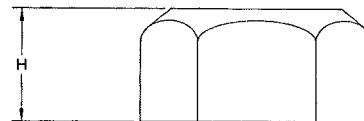
NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>													
FAULT CATEGORY													
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other			

SPECIFICATION CONTROL DRAWING



D3015-X LOCKNUT

PART NUMBER	SIZE	HEIGHT H	POSSIBLE SUPPLIER
D3015-1	1/4-20 UNC	0.31	ACKLANDS, P/N PFSLNNC14S1
D3015-3	5/16-18 UNC	0.34	ACKLANDS, P/N PFSLNNC516S1
D3015-5	7/16-14 UNC	0.46	ACKLANDS, P/N PFSLNNC716S1
D3015-7	M5	0.19	ACKLANDS, P/N FLMN021-005-0000

C

96151 ML5
13-01-24

RELEASED
09/07/15 JWD

NOTES:

- 1) MATERIAL: SS LOCKNUT WITH NYLON INSERT
- 2) FINISH: N/A
- 3) TOLERANCES: ALL DIMENSIONS SHOWN AS REFERENCE
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: N/A

C	REFORMAT DWG. -7 P/N NOW FLMN021-005-0000 WAS LNNMS1ZN BB-1), PAR 09-020	CP	09.07.08
B	ADD D3015-7	KJ	03.07.15
A	NEW ISSUE	DS	01.05.03
REV.	DESCRIPTION	BY	DATE
DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA			
DRAWN	<i>[Signature]</i>	DRAWING NO. D3015 REV. C	
CHECKED	<i>[Signature]</i>	SHEET 1 OF 1	
MFG. APPR.	<i>[Signature]</i>	TITLE	
APPROVED	<i>[Signature]</i>	SCALE	
DE APPR.	<i>[Signature]</i>	NTS	
DATE	09.07.08	COPYRIGHT © 2004 BY DART AEROSPACE LTD. THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

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**ACKLANDS
GRAINGER.**

ACKLANDS - GRAINGER INC.
765 CAMERON ST.
HAWKESBURY ON K6A 2B7
(613) 632-2739

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BILL
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DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY ON
K6A 1K7

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K6A 1K7

ACKLANDS - GRAINGER INC.
PO BOX 2970
WINNIPEG MB R3C 4B5
DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY ON
K6A 1K7

PACKING SLIP ONLY INVOICE TO FOLLOW	
PACKING SLIP# 1417 0423580	PAGE NO 1 of 1

NO. DU CLIENT CUST. NO. NO DE REFERENCE DU CLIENT CUST. REF. NO.
172628
1726280 18941

VENDEUR SALESPERSON	TERME TERMES	NO. DE VERSEMENTS NO. OF PMTS.		M.E.P. M.B.P.	DATE DU PREMIER VERSEMENT FIRST PAYMENT DATE	NO. DE LICENSE PROVINCIALE P.S.T. LIC. NO.		NO. DU CONTRAT CONTRACT NO.	EXP. DIRECTE DIR. SHIP N	DATE DE LA COMMANDE ORDER DATE 01/25/2013	DATE DE LA FACTURE INVOICE DATE 01/28/2013	
		*** NET 30 ***	0			N/A - HST						APP. DE CRÉDIT CREDIT AUTH
M85					00/00/0000 13:39							
ORDRE DE COMMANDE ORDER SEQ.	CODE DU MFG. MFG CODE	NO. DE PIÈCE ITEM NO.		DESCRIPTION		QUANTITE COMMANDÉE QUANTITY ORDERED	QUANTITE EXPÉDIÉE QUANTITY SHIPPED	CODE DE COMMANDE DIR. B.O. CODE	UNITE DE MESURE DE COMMANDE UNIT OF MEASURE	PRIX PRICE	PRIX EXTENDÉE PRICE	T.P.S./G.S.T.
C07B	PFS FW14S1			WASHER FLAT 18.8SS 1/4		9.64	✓500	500	EA	5.93	29.65	NYY
C07E	PFS LNNC516S1			NUT LOCK NYLON HEX NC 5/16 18.8 SS		20.04	✓50	50	EA	12.00	6.00	NYY
88B 01-08												
SOUS TOTAL / SUB TOTAL 35.65												
T.P.S./T.V.H. 4.63												
G.S.T./M.S.T. 0.00												
TAX PROV. TAX 40.28												
MONTANT TOTAL TOTAL AMOUNT												
FEURSHIP VIA H CUSTOMER PICK		FACTEURSHIP	SHIP COMPLETE	PORT PAYE P&D FREIGHT	DATE DE LIVRAISON REQUISE REQUESTED DELIVERY	CONNAISSANCE BILL OF LADING	CODE DE COMMANDE DIR. B.O. CODE B- B.O. COMMANDE DIR. C- ANNULÉE CANCEL D- EXP. DIRECTE DIR. SHIP	9275 9305	T.P.S./T.V.H. G.S.T./M.S.T. TAX PROV. TAX			
RECU PAR RECEIVED BY										FORM 7095-1		

**COPIE DU CLIENT
CUSTOMER COPY**



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO18941

Purchase Order Date 1/25/2013
PO Print Date 1/25/2013

Page Number 1 of 1

Order From : VC-ACK001

ACKLANDS - GRAINGER INC.
P.O. BOX 2970
WINNIPEG, MB R3C 4B5
CA

Contact Name	Buyer	Brigitte Golden
Vendor Phone	Requisition Nbr	
Vendor Fax	Tax Resale Nbr	10127-2607
Vendor Account Nbr	Terms	Net 30
	Currency	CAD
	FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAXED

Line Nbr	Reference Revision ID	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
		Vendor Part Number					
1	PFS-FW14S1	WASHER	1/25/2013 Yes	500.00 Each		\$0.0593	\$29.65
2	PFS-LNNCS5/16S1	Lock Nut	1/25/2013 Yes	50.00 Each		\$0.1200	\$6.00
		Special Inst:	AS PER DWG: D2529 B95917	REV: E			
		Special Inst:	AS PER DWG: D3015 B96151	REV: C SmB			

PO Total:

\$35.65

JB 3/6/2013

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required - YES NO

Change Nbr:

1

Change Date: 1/25/2013